

Work Order ID 117012

April-24-14 9:05:00 AM

117012

Page 1

Item ID: D3566-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Gasket Fwd & Aft

Start Date: 4/23/14 Start Qty: 18.00 ***18***

Cust Item ID:

Required Date: 4/23/14 Req'd Qty: 18.00 ***18***

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 14-04-28

Tooling: _____ Date: _____

Run Start

NR1

QC: _____ Date: _____

SPC (Y/N): _____ Date: _____

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

Draw Nbr

Revision Nbr

D3566

Rev C

100

100

FLOW WATER JET

Waterjet

Memo

FLOW CNC Waterjet

1-Cut as per Dwg D3566 Dwg Rev: C Prog Rev: C 2-
Deburr if necessaryNEO-063

110

QC2- Inspect parts off machine FAI/FAIB

0.00

18 0 Jm 14-05-2***110***

QC

Quality Control

Memo

0.00

18 0 Jm 14-05-2

120

QC8- Inspect parts - second check

0.00

DAS
27
9.59
141515***120***

QC

Quality Control

Memo

0.00

18 _____

DQA: _____ Date: _____

Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Date:

Work Order update only



Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
NCR No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design										
Doc/Data										
Equip/Tooling										
Handling/Pre										
Material										
Operator										
Offset/Setup										
Process										
Supplier										
Training										
Transport										
Unapproved										
FAULT CATEGORY										
Landing Gear			General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function							
			<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence							
			<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge							
			<input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							
			<input type="checkbox"/> Other							

Work Order ID 117012

April-24-14 9:05:00 AM

117012

Page 2

Item ID: D3566-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Gasket Fwd & Aft

Stop

NS2

Start Date: 4/23/14 Start Qty: 18.00 *18*

Cust Item ID:

Required Date: 4/23/14 Req'd Qty: 18.00 *18*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____

Tooling: _____ Date: _____

Run Start

NR1

QC: _____ Date: _____

SPC (Y/N): _____ Date: _____

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

130

Identify as per dwg & Stock Location: FP-00

130

Packaging

Packaging

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

0.00

0.00

18X / 14/05/2014

140

QC21- Final Inspection - Work Order Release

0.00

0.00

MLJ 14-05-06

140

QC

Quality Control

Memo

AM 14-05-05

DOA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____
 Part No. _____
 NCR No. _____

DISPOSITION

Rework
 Scrap
 Use-as-is
 Suspected Unapproved

AGAINST DEPARTMENT/PROCESS

Skid-tube
 Machining
 Thermoforming
 Large Fab

Crosstube
 Small Fab
 Finishing
 Composite

Water Jet
 Prod. Eng. Coor.
 Rec/Store/Packaging
 Supplier

Engineering
 Quality
 Other

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General					
	<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced	
	<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up	
	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Temperature/Cure	
	<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Weld	
	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Wrong Stock Pulled	
	<input type="checkbox"/> Crushing	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other	
	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge		
	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread			
	<input type="checkbox"/> Marks/Chatter	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set			
	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration			
	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence			

Picklist Print

Page 1

April-24-14 9:05:03 AM

Work Order ID: 117012

117012

Parent Item: D3566-1

D3566-1

Parent Item Name: Gasket Fwd & Aft

Start Date: 4/23/14

Required Date: 4/23/14

Start Qty: 18.00

Required Qty: 18.00

Comments: IPP Rev:A New Issue 07-03-08 ec
IPP Rev:B Added Drain Holes 07-07-09 JLM
IPP Rev:C As per Rev C 07-09-09 JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MNEO60S.063		Purchased	No			100	sf	896.8000	0.911	19	**		

MNEO60S.063

NEOPRENE SHEET 0.063

Location	Loc Qty	Loc Code
MAT052	896.8	
M126546	27.1	
M128266	69.7	08266
M128339	800	

JM1405-2

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____

Date: _____

Work Order update only

Work Order: _____
 Part No. _____
 NCR No. _____

DISPOSITION

Rework
 Scrap
 Use-as-is
 Suspected Unapproved

AGAINST DEPARTMENT/PROCESS

Skid-tube
 Machining
 Thermoforming
 Large Fab

Crosstube
 Small Fab
 Finishing
 Composite

Water Jet
 Prod. Eng. Coor.
 Rec/Store/Packaging
 Supplier

Engineering
 Quality
 Other

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General														
	<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Folio/Program	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>	Pressure/Forced					
	<input type="checkbox"/>	Centre Not Concentric	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Set-up					
	<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damage/Defect	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Temperature/Cure					
	<input type="checkbox"/>	Crimp/Kink/Ripple/Wave	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Inspection Incomplete/Unqualified	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Weld					
	<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Wrong Stock Pulled					
	<input type="checkbox"/>	Crushing	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Misaligned/off center	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	Other					
	<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>						
	<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Misread	<input type="checkbox"/>		<input type="checkbox"/>						
	<input type="checkbox"/>	Marks/Chatter	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Off-set	<input type="checkbox"/>		<input type="checkbox"/>						
	<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>						
	<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Fit/Function	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>						

DART AEROSPACE LTD	Work Order:	117012
Description: Gasket	Part Number:	D3566-1
Inspection Dwg: D3566	Rev: C	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

X First Article Prototype

DAS

Measured by:	Jm	Audited by:	27 9-39	Prototype Approval:	N/A
Date:	14-05-2	Date:	14/5/5	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	07.03.14	New Issue	KJ/JLM	
B	07.07.18	Dimensions updated per Dwg Rev. B	KJ/JLM	
C	07.09.26	Dwg Rev updated	KJ/EC/DD	EE

DQA: _____ Date: _____

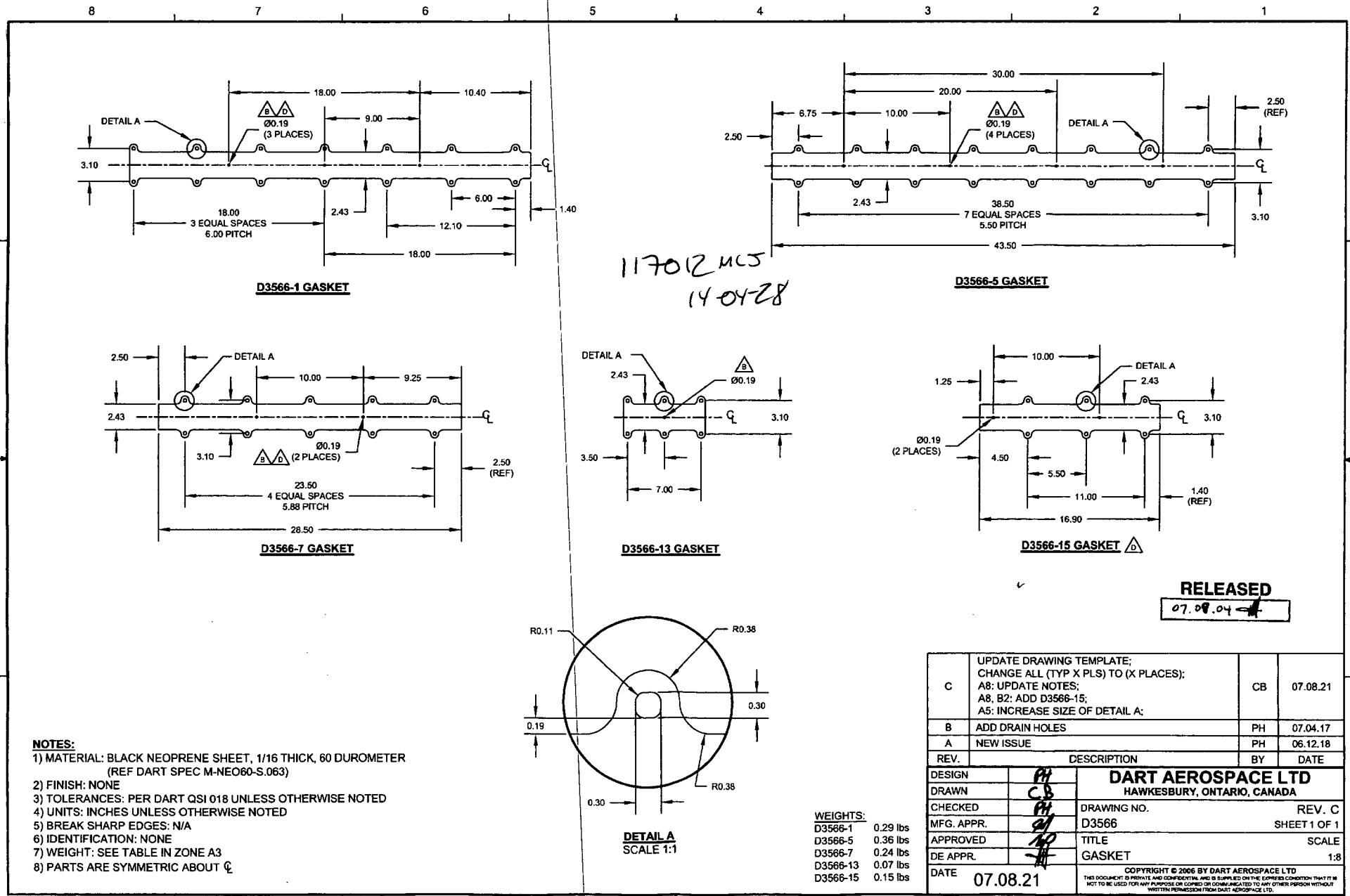


WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS																																																																					
Part No. _____			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																																																																			
NCR No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>																																																																			
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Training																																																																										
Transport																																																																										
Unapproved																																																																										
FAULT CATEGORY																																																																										
Landing Gear				<table border="1"> <tr> <td colspan="4">General</td> <td colspan="4">Other</td> </tr> <tr> <td>Bending</td> <td>Bend</td> <td>Folio/Program</td> <td>Outside Dimensions</td> <td>Pressure/Forced</td> </tr> <tr> <td>Centre Not Concentric</td> <td>BOM/Route</td> <td>Grain</td> <td>Over/Under tolerance</td> <td>Set-up</td> </tr> <tr> <td>Cracks</td> <td>Broken/Damage/Defect</td> <td>Hardware</td> <td>Part Incorrect</td> <td>Temperature/Cure</td> </tr> <tr> <td>Crimp/Kink/Ripple/Wave</td> <td>Burrs</td> <td>Inspection Incomplete/Unqualified</td> <td>Part Lost/Missing</td> <td>Weld</td> </tr> <tr> <td>Cuffs</td> <td>Contamination</td> <td>Instructions Incomplete/Unclear</td> <td>Part Moved</td> <td>Wrong Stock Pulled</td> </tr> <tr> <td>Crushing</td> <td>Countersink</td> <td>Misaligned/off center</td> <td>Positioned Wrong</td> <td></td> </tr> <tr> <td>Heat Treat</td> <td>Cut Too Short</td> <td>Mislabeled</td> <td>Power Loss/Surge</td> <td>Other</td> </tr> <tr> <td>Inspection Strip in Tube</td> <td>Drawing</td> <td>Misread</td> <td></td> <td></td> </tr> <tr> <td>Marks/Chatter</td> <td>Drill Holes</td> <td>Off-set</td> <td></td> <td></td> </tr> <tr> <td>Turning Sequence</td> <td>Finish</td> <td>Out of Calibration</td> <td></td> <td></td> </tr> <tr> <td>Wave/Twist in Tube</td> <td>Fit/Function</td> <td>Out of Sequence</td> <td></td> <td></td> </tr> </table>								General				Other				Bending	Bend	Folio/Program	Outside Dimensions	Pressure/Forced	Centre Not Concentric	BOM/Route	Grain	Over/Under tolerance	Set-up	Cracks	Broken/Damage/Defect	Hardware	Part Incorrect	Temperature/Cure	Crimp/Kink/Ripple/Wave	Burrs	Inspection Incomplete/Unqualified	Part Lost/Missing	Weld	Cuffs	Contamination	Instructions Incomplete/Unclear	Part Moved	Wrong Stock Pulled	Crushing	Countersink	Misaligned/off center	Positioned Wrong		Heat Treat	Cut Too Short	Mislabeled	Power Loss/Surge	Other	Inspection Strip in Tube	Drawing	Misread			Marks/Chatter	Drill Holes	Off-set			Turning Sequence	Finish	Out of Calibration			Wave/Twist in Tube	Fit/Function	Out of Sequence		
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DQA:

Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed:

Date: _____

Work Order update only

Work Order: _____
 Part No. _____
 NCR No. _____

DISPOSITION

Rework
 Scrap
 Use-as-is
 Suspected Unapproved

AGAINST DEPARTMENT/PROCESS

Skid-tube
 Machining
 Thermoforming
 Large Fab

Crosstube
 Small Fab
 Finishing
 Composite

Water Jet
 Prod. Eng. Coor.
 Rec/Store/Packaging
 Supplier

Engineering
 Quality
 Other

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function				<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence				<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other			
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>